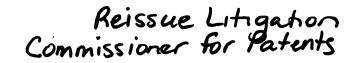
Reissue Litigation Commissioner for Patent.

PTO/SB/50 (06-03) Approved for use through 01/31/2004. OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE PAT	ENT APPLICAT	ION TRANSM	MITTAL				
Address	Attorney Do	ocket No.	9353-8RE				
Address to:	ss to:		Vince D'Amelio				
Mail Stop Reissue	Original Pat	tent Number	6,430,467 08/06/2002				
Commissioner for Patents P.O. Box 1450	Original Pat	tent Issue Date					
Alexandria, VA 22313-1450	(Month/Day						
APPLICATION FOR REISSUE OF:	Express Ma	ali Ladel No.	EV353592952US				
(Check applicable box)	Utility Patent	Design Pate					
APPLICATION ELEMENTS (37 CFR 1.173)		ACCOMPANYING APPLICATION PARTS					
Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee p	rocessina)	X Statem	ent of status and support for all es to the claims. See 37 CFR 1.173(c).				
2. Applicant claims small entity status. See 37		11. L. J Origina	al Patent Grant				
Specification and Claims in double column c (amended, if appropriate)		Ribboned Original Patent Grant					
Drawing(s) (proposed amendments, if appro	_ U ;	Statement of Loss (PTO/SB/55)					
Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52)		12. Foreign Priority Claim (35 U.S.C. (if applicable)					
S. X Power of Attorney		Information Disclosure Statement (IDS)/PTO-1449 Copies of					
7. X Original U.S. Patent currently assigned? (If Yes, check applicable box(es))	English Translation of Reissue Oath/Declaration						
Written Consent of all Assignees (PTO/	14. (if applicable)						
	15. X Preliminary Amendment						
37 CFR 3.73(b) Statement (PTO/SB/96)	16. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
8. CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table 17. Other:							
9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary) ————————————————————————————————————							
a. Computer Readable Form (CFR)							
 b. Specification Sequence Listing on: i CD-ROM (2 copies) or CD-R (2 copies) ii paper 	ies); or	L					
c. Statements verifying identity of above co	pies						
18. (CORRESPONDENCE	ADDRESS					
Customer Number: 20792		OR 🗌	Correspondence address below				
Name D. Randal Ayers	\						
Address Myers Bigel Sibley & S P.O. Box 37428	sajovec						
City Raleigh	Sta	ate NC	Zip Code 27627				
Country USA		9/854-1400	Fax 919/854-1401				
Name (Print/Type) D. Randal Ayers Signature	Re	gistration No. (Atto	10,175				
Signature D	lee	D	ate 1117 03				

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PTO/SB/56 (08-03)
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REISSUE APPLICATION FEE TRANSMITTAL FORM							Docket Number (Optional) 9353-8RE					
Claims as Filed – Part 1												
	(1)	T	(2)	(3)			Small	Entity		Other than a Small Entity		
	Claims in Patent	1	nber Filed in Reissue pplication	Number Extra		a R	ate	Fee			Rate	Fee
Total Claims (37 CFR 1.16(j)) Independent claim	(A) 29	(B)	76	****	47	= x	\$=			_	x \$ <u>18</u> =	846-00
(37 CFR 1.16(i))		(D)	 		4	= X	\$= 			or	x \$ 86 =	344.00
				Basic Fee (37 CFR 1.16(16(h))	\$				\$ <u>770.0</u> 0
			_		Total Filing I	ee		\$			OR	\$1 <u>.960</u> .0
Claims as Amended – Part 2												
	(1) Claims Rei	nainino		(2) Highest Number			l Evtra I———		Entity		Other than a	
	After Ame			Pr	eviously aid For	Clain Prese	ns Rate)	Fee		Rate	Fee
Total Claims (37 CFR 1.16(j))	***		MINUS	**		* =	x \$ _	=			x \$ =	
Independent Claims (37 CFR 1.16(i))	***		MINUS	****		=	x\$_	=			x\$=	
			- \} -	Total Additional Fee \$					\$		OR	\$
* If the entry in (D) is less than the entry in (C), Write "0" in column 3. ** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space. *** After any cancellation of claims. **** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20). ***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). Applicant claims small entity status. See 37 CFR 1.27.												
Please charge A duplicate co							in the amo	unt of				
The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number A duplicate copy of this sheet is enclosed.												
X A check in the	amount of \$	1,96	0.00			to cove	r the filing/a	addition	al fee is	enclo	sed.	
Payment by c	redit card. Fo	m PTO-	2038 is attac	hed.								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit cad information and authorization on PTO-2038.												
11/12/07	11/12/03						D. ildalde-					
Date					Signature of Applicant, Attorney or Agent of Record							
40,493					D. Randal Ayers							
Registration Number, if applicable Typed or printed name												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.